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## BIB DATA SHEET

CONFIRMATION NO. 3154

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/720,026	11/21/2003 RULE	435	1647	DX01074B1K

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/667,290 09/18/2003  
 which is a DIV of 09/853,180 05/10/2001 PAT 6,756,481  
 which claims benefit of 60/203,426 05/10/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
06/14/2004

Foreign Priority claimed 35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWINGS 0	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
Verified and /JEGATHEESAN SEHARASEYON/ Examiner's Signature		Initials				

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**TITLE**

MAMMALIAN RECEPTOR PROTEIN DCRS5;METHODS OF TREATMENT

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No._____ to charge/credit DEPOSIT ACCOUNT No._____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit